

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/591620

FILED DATE

27 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3	/					
4	2					
5	2					
6						
7	2					
8	2					
9	1					
10	/					
11	/					
12	2					
13	2					
14	2					
15	2					
16	/					
17	/					
18	/					
19	/					
20	2					
21	2					
22						
23	2					
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48						
49						
50						
TOTAL IND.	6	↓		↓		↓
TOTAL DEP.	32	←		←		←
TOTAL CLAIMS	28	[REDACTED]		[REDACTED]		[REDACTED]

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.				↓		↓
TOTAL DEP.			←		←	←
TOTAL CLAIMS			[REDACTED]		[REDACTED]	[REDACTED]